

JUN. 5. 2003 4:44PM

NIXON PEABODY

NO. 6379 P. 1

P. 1

* * * COMMUNICATION RESULT REPORT (MAY. 27. 2003 1:50PM) * * *

TTI NIXON PEABODY

TRANSMITTED/STORED MAY. 27. 2003 1:45PM

FILE MODE OPTION

ADDRESS

RESULT

PAGE

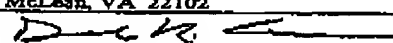
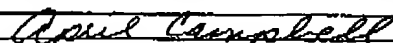
6244 MEMORY TX

#068

OK

16/16

REASON FOR ERROR UP OR LINE FAIL
-1) HANG UP
-3) NO ANSWER-2) BUSY
-4) NO FACSIMILE CONNECTION

TRANSMITTAL FORM (to be used for all correspondence after initial filing)		Application Number 09/865,546	
Total Number of Pages in This Submission 15		Filing Date May 29, 2001	
		First Named Inventor Teiji NODA	
		Group Art Unit 2829	
		Examiner Name Asok K. SARKAR	
		Attorney Docket Number 740819-560	
ENCLOSURES (check all that apply)			
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavit/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Declaration and Power of Attorney <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	
		<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Application Data Sheet <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): <u>ACE Transmittal</u>	
Remarks		<input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees required or credit any overpayments to Deposit Account No. 19-2380 (740819-560) for the above identified docket number.	
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm or Individual name		Donald R. Spudebaker, Reg. No. 32,815 Nixon Peabody LLP 8180 Greensboro Drive Suite 800 McLean, VA 22102	
Signature			
Date		May 27, 2003	
CERTIFICATE OF MAILING OR TRANSMISSION (37 CFR 1.8(c))			
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to: Mail Stop Non-Fees Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450, or being facsimile transmitted to the USPTO at (703) 472-2212, on May 27, 2003.			
Signature:			
Name:		April Campbell	

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